

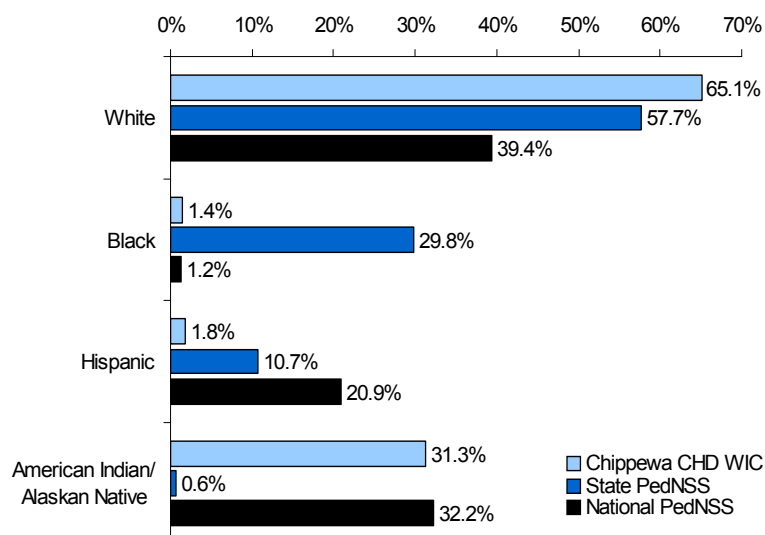
2003 WIC Local Agency Pediatric Nutrition Surveillance System (PedNSS) Report

The goal of Michigan WIC is to improve the health outcome of low income nutritionally at-risk women and children by providing supplemental nutritious foods, offering nutrition education/counseling, breastfeeding support, and referral to other health and social services. This report is developed to provide specific local information regarding the health and nutritional status of WIC participants. In order to provide local statistics stratified by age and race/ethnicity, three-year averages were calculated for each health indicator. Consequently, point estimates represent the incidence or prevalence of an indicator between the years 2001 and 2003. Trends were constructed using rolling averages and cover the period between 1998 and 2003.

Chippewa County is on the eastern most tip of the upper peninsula of Michigan. In 2000, 20.9% of the 2,050 children under the age of five years old in the county lived below poverty. The Chippewa County Health Department (Chippewa CHD) served 1,166 of all children participating in Michigan WIC in 2003. Data about children participating in WIC through the Chippewa CHD revealed:

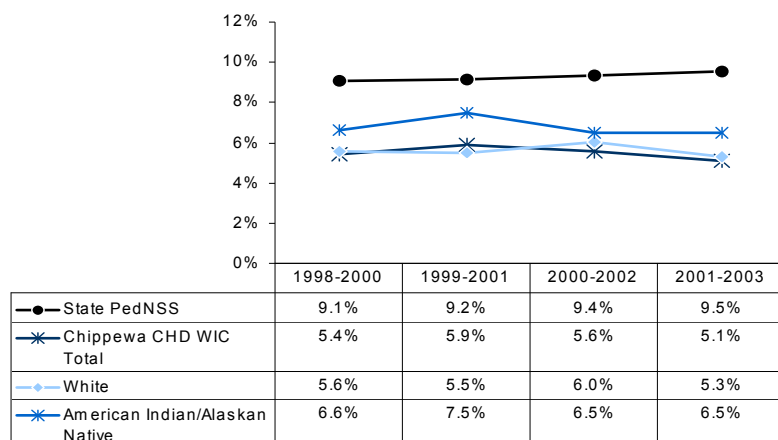
- The incidence of low birthweight was 5.1% among Chippewa CHD infants. Also the incidence of high birthweight was 12.3%;
- The prevalence of short stature was 8.4% for children under the age of two years old and 4.9% for children two to five years old;
- 35.1% of children two to five years old were either overweight or at risk of overweight;
- 7.2% of infants and children under five years old had iron deficiency anemia;
- Over half of infants, 58.6%, were ever breastfed.

Figure 1. **Racial/ethnic distribution** among infants and children under five years old, 2001-2003 PedNSS



The majority of infants and children under five years old, 96.4%, of Chippewa CHD WIC were either non-Hispanic White or Native American/Alaskan Native.

Figure 2. Trend in **low birthweight*** by race/ethnicity among infants in the Chippewa CHD WIC Agency, 1998-2003 MI PedNSS



When stratified by race/ethnicity, the trend in low birthweight was higher for American Indian/Alaskan Native infants of Chippewa CHD WIC than White infants.

*Low birthweight is defined as having a birthweight less than 2500 grams (5lbs 9 oz) regardless of gestational age.

Figure 3. Trend in **ever breastfed** by race/ethnicity among infants in the Chippewa CHD WIC Agency, 1998-2003 PedNSS

The trend of infants ever breastfed in Chippewa CHD WIC increased faster among American Indian/Alaskan Native participants compared to White participants, average annual percent increase was 3.7% and 2.6%, respectively.

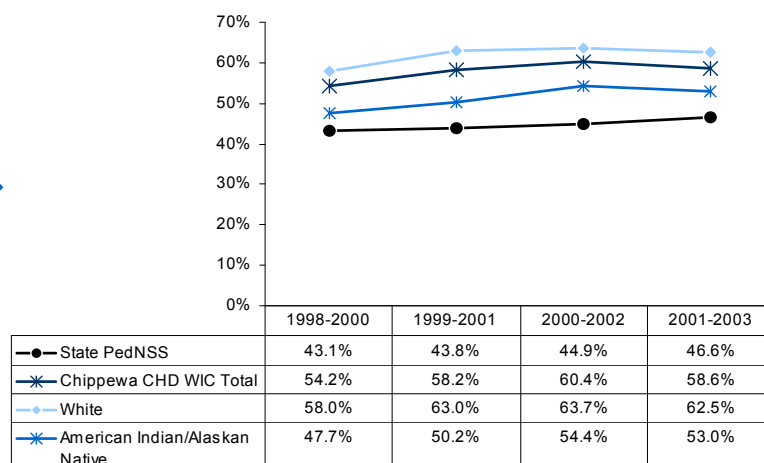
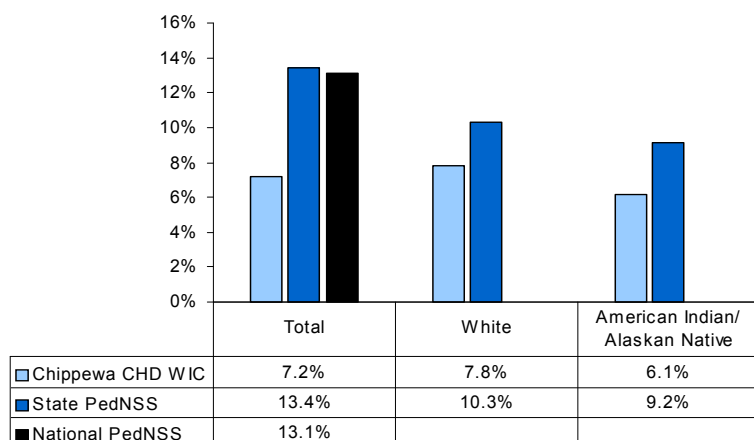


Figure 4. Average prevalence of **iron deficiency anemia*** by race/ethnicity among infants and children under five years old, 2001-2003 PedNSS

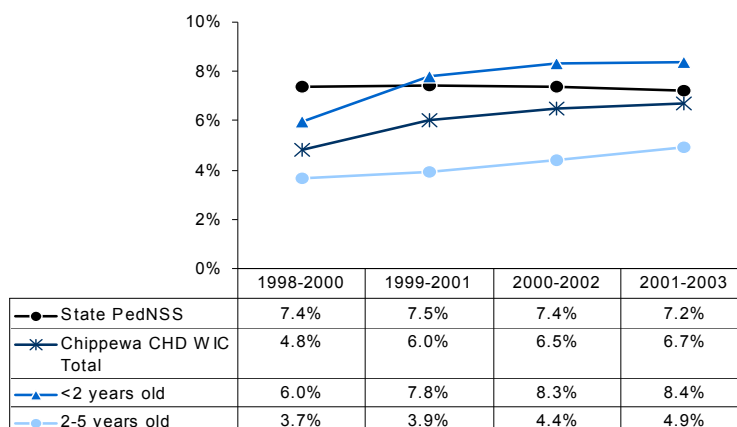


The prevalence of iron deficiency anemia among Chippewa CHD WIC infants and children was almost half that of their state and national peers.

*For infants under the age of one year, iron deficiency anemia is defined as having either a hemoglobin concentration of 11.0 g/dL or a hematocrit level of less than 33%. For children two to five years old, iron deficiency anemia is defined as having either a hemoglobin concentration less than 11.1 g/dL or a hematocrit level below 33.3%.

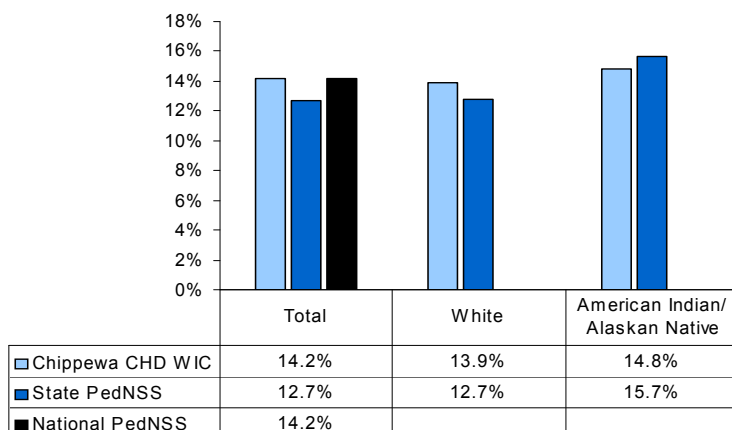
Unlike the trend of short stature among state WIC infants and children, the trend in short stature among Chippewa CHD WIC infants and children under five years old increased 40% since 1998.

Figure 5. Trend in **short stature*** by age group among infants and children under five years old, 1998-2003 MI PedNSS



*Short stature is defined as having a height-for-age below the 5th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

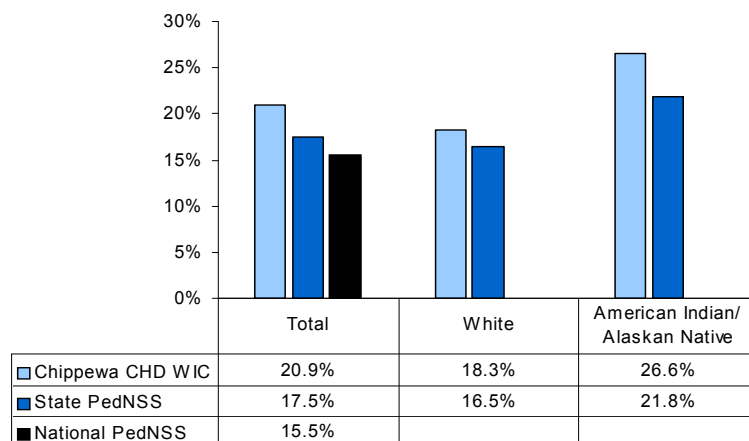
Figure 6. Average prevalence of **overweight*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



*Overweight is defined as having a weight-for-height greater than the 95th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

The prevalence of overweight among children two to five years old was equivalent for national and Chippewa CHD PedNSS participants: 14.2%.

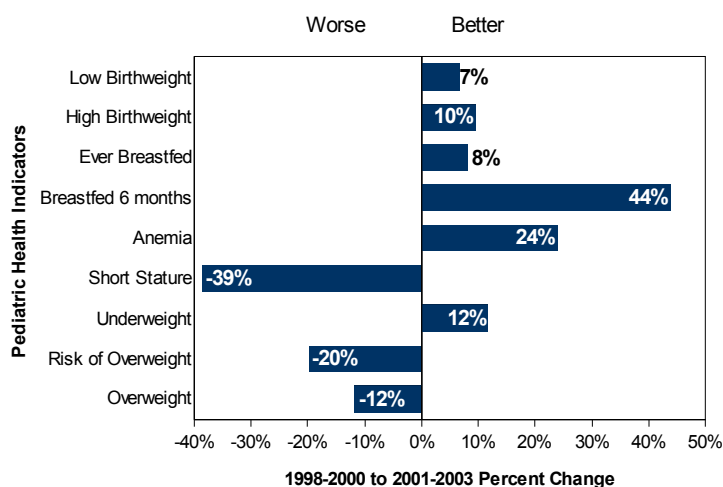
Figure 7. Average prevalence of **risk of overweight*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



*Risk of overweight is defined as having a weight-for-height between the 85th and the 95th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

Compared to state and national PedNSS children, Chippewa CHD WIC children two to five years old had the highest prevalence of risk of overweight: 20.9%.

Figure 8. Pediatric **health progress review** for Chippewa CHD WIC infants and children under five years old, 1998-2000 and 2001-2003 MI PedNSS



Chippewa CHD WIC improved all but three health and nutritional indicators (short stature, overweight, and risk of overweight).



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WIC Program

Mission Statement

The mission of the Michigan WIC program is to improve the health outcomes and quality of life for eligible women, infants, and children by providing nutritious food, nutrition education, breastfeeding promotion, and support and referrals to health and other services. To this end:

- Delivery of services and supports are to be provided in a caring, respectful, efficient, and cost effective manner.
- Delivery of services shall be provided in a culturally competent and confidential manner.
- The WIC Program shall assure the broadest possible access to services, supports, and food.